

L 00000006353

CLAUDE R. WALKER, ESQ.
HUEY, GUILDAY & TUCKER, P.A.
P. O. BOX 1794
TALLAHASSEE, FL 32302

Address

Attn: Julie 224-7091
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Hillside Office Park L00000006353
(Corporation Name) (Document #)
2. Building Investors, L.C.
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in
☐ Mail out

☒ Pick up time
☐ Will wait

☐ Photocopy

☐ Certified Copy
☐ Certificate of Status

Call when ready - 224-7091 x117

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED
00 JUN -2 PM 3:44
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

500003275645--9
-06/05/00-01001-009
*****25.00 *****25.00

Examiner's Initials

AMENDMENT TO ARTICLES OF ORGANIZATION

THE UNDERSIGNED, as a member of HILLSIDE OFFICE PARK BUILDING
INVESTORS, L.C., amends the name of the company as follows:

The name of the company, effective immediately, shall be:

HILLSIDE 3 OFFICE PARK INVESTORS, L.C.

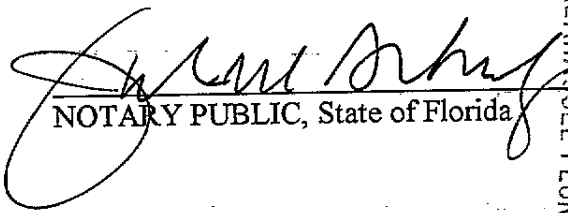
IN WITNESS WHEREOF, the undersigned member has hereunto set his hand and seal
this 2nd day of June, 2000.


Member: William E. Williams

STATE OF FLORIDA :
COUNTY OF LEON :

BEFORE ME, the undersigned authority, personally appeared William E. Williams, who is
personally known to me and who before me executed the foregoing for the purposes therein
expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at
Tallahassee, Leon County, Florida, this 2nd day of June, 2000.


NOTARY PUBLIC, State of Florida

My Commission Expires:



Julia M. Schulz
MY COMMISSION # CC917541 EXPIRES
May 17, 2004
BONDED THRU TROY FAIN INSURANCE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JUN -2 AM 9:31

FILED